PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docke: Number 10/511263

Effective October 1, 2003

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	
-	OTAL CLAIM	(Columi	1)	(Colu	<u>ımn 2)</u>		TYPE [OF.	SMALL		
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI		OR	BASIC FEE	950
TOTAL CHARGEABLE CLAIMS			ವಿ խ minus 20=		- 6			XS 9=		OR	XS18=	108
	DEPENDENT C		√ minus 3 =		<u>" J</u>			X43=		OR	X86=	264
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	-290=	
* If the difference in column 1 is less than zero, enter					"0 " in c	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										* 2	OTHER	THAN
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	Ŕ	Minus	grap.		=		XS 9=		OR	X\$18=	
AME	Independent	<u> -</u>	Minus	<u></u>				X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL		OR	TOTAL	
			ADDIT. FEE		,	ADDIT. FEE						
		(Column 1) CLAIMS	T	(Colum HIĞH	EST	(Column 3)	ľ	-	ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	_	NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
S OS	Total	'#	Minus	on ·	1	=		X\$ 9=		OR	X\$18=	
AME	Incependent	P	Minus	000		=		X43=		OR:	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	ENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL		. OB :	TOTAL	
								DDIT. FEE		,	ADDIT. FEE	
		(Column 1)		(Colum		(Column 3).		· ·		F		4551
ENT C		REMAINING AFTER AMENDMENT	-	NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	o	Minus	0·0		=		X\$ 9=		OR	X\$18=	
I'ME	Independent	ŵ	Minus	900		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
00 l	f the "Highest Nur	mber Previously Pa	d For IN THIS	S SPACE is	less than	'20', enter "20."	. <u> </u>	TOTAL DDIT. FEE		OR Z	TOTAL ODIT. FEE	
or If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDI												

FORM PTO-075 (Rev 10/03)

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